

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND												
1 Date of Request: <u>12/05/07</u>		2 Serial/Patent # <u>10/821365</u>										
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
	Filing			\$								
	Amendment			\$								
X	Extension of Time		05/29/07	\$ 510.00								
	Notice of Appeal/Appeal			\$								
	Petition			\$								
	Issue			\$								
	Cert of Correction/Terminal Disc.			\$								
	Maintenance			\$								
	Assignment			\$								
	Other			\$								
7 TOTAL AMOUNT OF REFUND			\$ 510.00									
8 TO BE REFUNDED BY: <u>Credit Card</u>												
Treasury Check												
Credit Deposit A/C #:												
9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>												
10 REASON:												
	Overpayment											
	Duplicate Payment											
X	No Fee Due (Explanation):											
LATE												
11 REFUND REQUESTED BY:												
TYPED/PRINTED NAME: <u>Frances Hicks</u>		TITLE: <u>Petitions Examiner</u>										
SIGNATURE: <u><i>Frances Hicks</i></u>		PHONE: <u>x23218</u>										
OFFICE: <u>Office of Petitions</u>												
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****												
APPROVED: <u><i>CKH</i></u>		DATE: <u>12/5/07</u>										

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*